

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90219 028 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

80066673

DOCUMENT #V38355 1. Entity Name PELICAN MARSH PROPERTIES, INC.																	
Principal Place of Business 24301 WALDEN CENTER DR. BONITA SPRINGS, FL 34134 US			Mailing Address 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134 US														
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.														
City & State			City & State														
Zip		Country		4. FEI Number 65-0348731													
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable													
☐ CHECK HERE IF MAKING CHANGES																	
6. Name and Address of Current Registered Agent HASTINGS, VIVIAN N 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code													
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																	
SIGNATURE _____ (NOTE: Registered Agent signature required when returning) DATE _____																	
FILE KNOWLEDGE FEE IS \$150.00 After May 1, 2003 Fee will be \$560.00 Make Check Payable to Florida Department of State																	
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																	
10. OFFICERS AND DIRECTORS																	
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																	
SIGNATURE: <u>Vivian N. Hastings</u> 03/25/03 (239) 498-8605 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vivian N. Hastings, Secretary																	

CH2E034 (10/02)